



State of Alaska
CHILD CARE & SCHOOL IMMUNIZATION
REQUIREMENTS
Packet
Revised 6/2013



ALASKA IMMUNIZATION PROGRAM
(907) 269-8088
OR
1-888-430-4321
<http://www.epi.alaska.gov/immunize>

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Common vaccines/vaccine combination names for *Required* immunizations:

NOTE: The following table is provided as a reference only. To lessen confusion, **PROVIDERS DOCUMENTING CURRENT IMMUNIZATIONS SHOULD USE GENERIC NAMES** (e.g., DTaP, Hepatitis B) rather than brand names.

Vaccine, by Generic Name or Trade Name (® or ™)	Used for Protection Against This Disease(s)
ACEL-IMUNE®	Diphtheria/ Tetanus/ Pertussis
ActHIB®	Hib (<i>Haemophilus influenzae</i> type b)
ADACEL ™	Tetanus/ Diphtheria/ Pertussis
Attenuvax®	Measles
Boostrix ™	Tetanus/ Diphtheria/ Pertussis
Certiva ™	Diphtheria/ Tetanus/ Pertussis
COMVAX ™	Hepatitis B/ Hib (<i>Haemophilus influenzae</i> type b)
DAPTACEL ™	Diphtheria/ Tetanus/ Pertussis
Decavac®	Tetanus/ Diphtheria
DT	Diphtheria/ Tetanus
DTaP	Diphtheria/ Tetanus/ Pertussis
DTP	Diphtheria/ Tetanus/ Pertussis
DTwP	Diphtheria/ Tetanus/ Pertussis
Engerix-B®	Hepatitis B
HAV	Hepatitis A
Havrix®	Hepatitis A
HbOC	Hib (<i>Haemophilus influenzae</i> type b)
HBV	Hepatitis B
Heptavax®	Hepatitis B
Hiberix®	Hib (<i>Haemophilus influenzae</i> type b)
HibTITER®	Hib (<i>Haemophilus influenzae</i> type b)
Infanrix ™	Diphtheria/ Tetanus/ Pertussis
IPOL®	Polio
IPV	Polio
Kinrix ™	Diphtheria/ Tetanus/ Pertussis/ Polio
MenHibrix®	Hib/ Meningococcal disease, (Hib is the required immunization component of this combo vaccine)
Meruvax II®	Rubella
MMR	Measles/ Mumps/ Rubella
MMRV	Measles/ Mumps/ Rubella/ Varicella
MR	Measles/ Rubella
Mumpsavax®	Mumps
OmniHIB ™	Hib (<i>Haemophilus influenzae</i> type b)
OPV	Polio
ORIMUNE®	Polio
Pediarix ™	Diphtheria/ Tetanus/ Pertussis/ Hepatitis B/ Polio
PedvaxHIB®	Hib (<i>Haemophilus influenzae</i> type b)
Pentacel®	Diphtheria/ Tetanus/ Pertussis/ Polio/ Hib (<i>Haemophilus influenzae</i> type b)
ProHIBIT ™	Hib (<i>Haemophilus influenzae</i> type b)
PROQUAD®	Measles/ Mumps/ Rubella/ Varicella
PRP-OMP (PedVaxHIB®)	Hib (<i>Haemophilus influenzae</i> type b)
PRP-T (ActHIB®)	Hib (<i>Haemophilus influenzae</i> type b)
Quadracel®	Diphtheria/ Tetanus/ Pertussis/ Polio
RECOMBIVAX HB®	Hepatitis B
“Sabin”	Polio
“Salk”	Polio
Td	Tetanus/ Diphtheria
Tdap	Tetanus/ Diphtheria/ Pertussis
Tenivac ™	Tetanus/ Diphtheria
TETRAMUNE®	Diphtheria/ Tetanus/ Pertussis/ Hib (<i>Haemophilus influenzae</i> type b)
TriHIBit®	Diphtheria/ Tetanus/ Pertussis/ Hib (<i>Haemophilus influenzae</i> type b)
Tripedia®	Diphtheria/ Tetanus/ Pertussis
Twinrix®	Hepatitis A/ Hepatitis B (In US – Adult formulation for ≥ 18 yrs of age)
VAQTA®	Hepatitis A
Varicella	Chickenpox
VARIVAX®	Varicella (chickenpox)
VZV	Varicella (chickenpox)

Note: PPD, Mono-Vacc[®], and Tine test are used for tuberculosis screening. They are *not* vaccines.

Common vaccines/vaccine combination names NOT required for school/child care attendance:

NOTE: While not required for school/child care attendance, many of these vaccines are *medically recommended*.

Vaccine, by Generic Name or Trade Name (® or ™)	Used for Protection Against This Disease(s)	Additional Information
4vHPV	Human Papillomavirus	4-Valent Human Papillomavirus
9vHPV	Human Papillomavirus	9-Valent Human Papillomavirus
Afluria®	Seasonal Influenza	
Agriflu™	Seasonal Influenza	
BCG	Tuberculosis	Not used in the U.S.
Bexsero®	Meningococcal disease	
cclIV3	Seasonal Influenza	
Cervarix®	Human Papillomavirus	
Fluarix®	Seasonal Influenza	
Flublok®	Seasonal Influenza	
Flucelvax®	Seasonal Influenza	
FluLaval®	Seasonal Influenza	
FluMist®	Seasonal Influenza	Nasal Spray (LAIV)
Fluvirin®	Seasonal Influenza	
Fluzone®	Seasonal Influenza	
Fluzone® Intradermal	Seasonal Influenza	
GARDASIL®	Human Papillomavirus	
GARDASIL®9	Human Papillomavirus	
HPV	Human Papillomavirus	
IIV, IIV3, IIV4	Seasonal Influenza	Inactivated Influenza Vaccine, 3-valent, 4-valent
LAIV4	Seasonal Influenza	
MCV4	Meningococcal disease	Meningococcal Conjugate Vaccine 4-valent
Menactra™	Meningococcal disease	Meningococcal Conjugate Vaccine 4-valent
MenACWY	Meningococcal disease	
MenB	Meningococcal disease	
MenHibrix®	Meningococcal disease/Hib	Hib is a required vaccine see other side
Menomune™	Meningococcal disease	Meningococcal Polysaccharide Vaccine 4-valent
Menveo®	Meningococcal disease	
MPSV, MPSV4	Meningococcal disease	
MPV4	Meningococcal disease	Meningococcal Polysaccharide Vaccine 4-valent
PCV7	Pneumococcal disease	Pneumococcal Conjugate Vaccine 7-valent
PCV13	Pneumococcal disease	Pneumococcal Conjugate Vaccine 13-valent
Pneumovax® 23	Pneumococcal disease	Pneumococcal Polysaccharide Vaccine 23-valent
PPSV23	Pneumococcal disease	Pneumococcal Polysaccharide Vaccine 23-valent
PPV23	Pneumococcal disease	Pneumococcal Polysaccharide Vaccine 23-valent
Prevnar™	Pneumococcal disease	
RIV3	Seasonal Influenza	
Rotarix®	Rotavirus	
Rotashield®	Rotavirus	No longer used in the U.S.
RotaTeq®	Rotavirus	
RV1, RV5	Rotavirus	
Trumenba®	Meningococcal disease	

Note: PPD, Mono-Vacc®, and Tine test are used for tuberculosis screening. They are *not* vaccines.

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Infancy Thru- Preschool Page 1 of 3	Alaska Immunization Compliance Standards Infancy Thru Preschool EFFECTIVE July 1, 2009					
	<i>Diphtheria, Tetanus, Pertussis (DTP/DTaP/DT)</i>		<i>Polio (OPV, IPV)</i>		<i>Measles, Mumps, Rubella (MMR)</i>	
	Required spacing		Required spacing		Required spacing	
Dose #	Minimum	Maximum	Minimum	Maximum	Minimum	Maximum
1	Not valid before 6 wks of age	By 3 mos of age	Not valid before 6 wks of age	By 3 mos of age	Not valid before 1st birthday	By 16 mos of age
2	1 mo after #1	3 mos after #1	1 mo after #1	3 mos after #1		
3	1 mo after #2	3 mos after #2	1 mo after #2	1 yr after #2		
4	4 mos after #3	1 yr after #3				
	An additional dose is required if minimum spacing requirements are not met. A child who has received 6 or more doses does not require more, regardless of spacing.		An additional dose is required if minimum spacing requirements are not met.		An additional dose is required if minimum spacing requirements are not met.	

For compliance purposes:

Age = age in calendar weeks or months (e.g., "by 6 wks of age" or "by 2 mo of age")

Interval between doses calculated as 28 days = 1 month

"Maximum" (under required spacing) - refers to the maximum time period before a child who has not completed the required number of doses would be "out of compliance." Doses received *after* the "maximum" intervals are medically acceptable and bring the child back into agreement with compliance standards.

"Kindergarten" - For the purposes of these guidelines, a "child in kindergarten" is one who was born prior to September 2 at least five years prior to kindergarten entry. For example, a child entering kindergarten in 2010 must have been born before September 2, 2005. Definition follows kindergarten age criteria established by the AK Dept of Education and Early Development.

Infancy Thru Preschool Page 2 of 3	Alaska Immunization Compliance Standards Infancy Thru Preschool EFFECTIVE July 1, 2009					
	Hepatitis A		Hepatitis B		Varicella "Chickenpox"	
	Required spacing		Required spacing		Required spacing	
	Minimum	Maximum	Minimum	Maximum	Minimum	Maximum
1	Not valid before 1 st birthday	By 25 mos of age	At birth	By 2 mos of age	Not valid before 1st birthday	By 19 mos of age
2	6 mos after #1	19 mos after #1	1 mo after #1	3 mos after #1		
3			2 mos after #2 and at least 4 mos after #1	18 mos after #2		
	An additional dose is required if minimum spacing requirements are not met.		An additional dose is required if minimum spacing requirements are not met.		An additional dose is required if minimum spacing requirements are not met.	

For compliance purposes:

Age = age in calendar weeks or months (e.g., "by 6 wks of age" or "by 2 mo of age")

Interval between doses calculated as 28 days = 1 month

"Maximum" (under Required spacing) - refers to the maximum time period before a child who has not completed the required number of doses would be "out of compliance." Doses received *after* the "maximum" intervals are medically acceptable and bring the child back into agreement with compliance standards.

"Kindergarten" - For the purposes of these guidelines, a "child in kindergarten" is one who was born prior to September 2 at least five years prior to kindergarten entry. For example, a child entering kindergarten in 2010 must have been born before September 2, 2005. Definition follows kindergarten age criteria established by the AK Dept of Education and Early Development.

Special Information about Hib Compliance

BRAND OF VACCINE USED – At least three brands of Hib vaccine currently are licensed in the United States. For children beginning Hib immunization in infancy, two brands require 4 total doses, while one requires only 3. **For purposes of compliance**, the 3-dose schedule shown below will be used, regardless of the type of vaccine received.

Infancy Thru Preschool Page 3 of 3	Alaska Immunization Compliance Standards for Hib Hib is required <u>only for children under 5 years of age</u>		
Dose #	Hib		
		Required spacing	
		Minimum	Maximum
1	6 wks-59 mos of age	Not valid before 6 wks of age	By 3 mos of age
2	6 wks-11 mos of age	1 mo after #1	3 mos after #1
	12-14 mos of age	1 mo after #1 ⁺	3 mos after #1 ⁺
	15-59 mos of age	2 mo after #1	3 mos after #1
3	6 wks - 11 mos	Not valid <i>for compliance</i> if received before 12 mos of age	Not applicable
	12-59 mos	2 mos after #2 (Not valid <i>for compliance</i> if received before 12 mos of age)	3 mos after #2
	<p>An additional dose is required if:</p> <ul style="list-style-type: none">Minimum spacing requirements are not met. <p>An additional dose is NOT required if:</p> <ul style="list-style-type: none">Child is 5 yrs of age and older.Child received at least one dose after 15 mo of age.Child received 2 doses after 12 mos of age with a minimum interval of 2 mos. <p>+ If a child received dose #1 after 12 mo of age, a minimum of 2 months is required between dose #1 and #2. To remain in compliance, the child must receive dose #2 a maximum of 3 months after dose #1. If the child receives dose #2 at least 2 months after dose #1, no additional doses are needed.</p>		

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K-12 Page 1 of 2	Alaska Immunization Compliance Standards FOR CHILDREN IN KINDERGARTEN Thru 12 th GRADE EFFECTIVE July 1, 2009					
Dose #	Diphtheria, Tetanus, Pertussis (DTP/DTaP/DT/Td/Tdap)		Polio (OPV, IPV)		Measles, Mumps, Rubella (MMR)	
	Required spacing		Required spacing		Required spacing	
	Minimum	Maximum	Minimum	Maximum	Minimum	Maximum
1	Not valid before 6 wks of age	Before facility entry	Not valid before 6 wks of age	Before facility entry	Not valid before 1st birthday	Before facility entry
2	1 mo after #1	3 mos after #1	1 mo after #1	3 mos after #1	1 mo after #1 (measles only)	3 mos after #1 (measles only)
3	<u>current age less than 7 yrs</u> 1 mo after #2 3 mos after #2		1 mo after #2	1 yr after #2		
	<u>current age 7 yrs or older</u> 6 mos after #2 1 yr after #2					
4	<u>current age less than 7 yrs</u> 4 mos after #3 1 yr after #3					
	<u>current age 7 yrs or older</u> Only 3 valid doses required					
5*	<u>current age less than 7 yrs</u> 6 mos after #4 and on or after 4 yrs of age Before facility entry					
	<u>current age 7 yrs or older</u> Only 3 valid doses required					
	An additional dose is required if minimum spacing requirements are not met. * Dose #5 is not required if an appropriately-spaced dose #4 was received on or after 4 years of age. A child who has received 6 or more doses does not require more, regardless of spacing. Pertussis is not required on or after 7 years of age unless 10 years has passed since last tetanus/diphtheria containing vaccine.		An additional dose is required if minimum spacing requirements are not met. Polio is not required on or after 18 years of age.		An additional dose is required if minimum spacing requirements are not met. 2nd Dose: A 2 nd dose of <i>measles only</i> is required. However, mumps and rubella often are received as a component of MMR vaccine. Rubella is not required on or after 12 years of age.	
10 year Booster	<u>Tdap Requirement:</u> Required within 10 years of last tetanus/diphtheria-containing vaccine.					

K-12 Page 2 of 2	Alaska Immunization Compliance Standards FOR CHILDREN IN KINDERGARTEN Thru 12TH GRADE EFFECTIVE July 1, 2009					
Dose #	Hepatitis A		Hepatitis B		Varicella “chickenpox” Required only in grades K through 6 th	
	Required spacing		Required spacing		Required spacing	
	Minimum	Maximum	Minimum	Maximum	Minimum	Maximum
1	Not valid before 1 st birthday	Before facility entry	At birth	Before facility entry	Not valid before 1 st birthday	Before facility entry
2	6 mos after #1	19 mos after #1	1 mo after #1	3 mos after #1	1 mo after #1	4 mos after #1
3			2 mos after #2 and at least 4 mos after #1	18 mos after #2		
	An additional dose is required if minimum spacing requirements are not met.		2-dose option for adolescents: Three (3) appropriately-spaced doses of hepatitis B are required <i>unless</i> a copy of a medically-verified record that clearly documents receipt of 2 doses that meet ALL the following criteria is maintained at school/child care: Vaccine Used <ul style="list-style-type: none"> Merck <i>RecombivaxHB</i>® “Adult” formulation (contains 10 mcg of hepatitis B surface antigen) Age when BOTH doses were received <ul style="list-style-type: none"> 11 through 15 years Interval <ul style="list-style-type: none"> at least 4 mo between doses compliance “maximum” = 7 mos after #1 		An additional dose is required if minimum spacing requirements are not met. 2 doses of varicella required for K through 6 th grades only. Varicella is NOT required for 7 th -12 th grades.	

For compliance purposes (also applies to previous charts):

Age = age in calendar weeks or months (e.g., “by 6 wks of age” or “by 2 mo of age”)

Interval between doses calculated as 28 days = 1 month

“Maximum” (under Required spacing) - refers to the maximum time period before a child who has not received the required number of doses would be considered out of compliance. Doses received *after* the “maximum” intervals are medically acceptable and bring the child back into agreement with compliance standards.

“Kindergarten” - For the purposes of these guidelines, a “child in kindergarten” is one who was born prior to September 2 at least five years prior to kindergarten entry. For example, a child entering kindergarten in 2010 must have been born before September 2, 2005. *Definition follows kindergarten age criteria established by the AK Dept of Education and Early Development.*

Exemption Documentation Requirements for School/Child Care/Head Start and Preschool

Immunity:

- The State *Medical Exemption / Immunity Form* (enclosed) is required for documentation of disease history/immunity. (Medically valid documentation written and dated prior to July 1, 2009 will be grandfathered.)
- Documentation must be signed by an Alaska-licensed MD, DO, ANP, or PA, stating the child is not receiving immunization(s) due to disease history/immunity.
- Titer results are not required to be filed in school/child care records.

Medical Exemptions:

- The State *Medical Exemption / Immunity Form* (enclosed) is required for documentation of medical exemptions. (Medically valid documentation written and dated prior to July 1, 2009 will be grandfathered.)
- Documentation must be signed by an Alaska-licensed MD, DO, ANP, or PA, stating the child is exempt from receiving immunization(s).

Religious Exemptions:

- The *State of Alaska Religious Exemption* form with a revision date of March 2013 (enclosed) is required for children whose parents/guardians claim religious exemption status. Previously completed religious exemption forms will **not** be grandfathered.
- Modification to the wording of the State religious exemption form may invalidate the exemption. Statements indicating philosophical or personal opposition to vaccines will invalidate religious exemption documentation.
- Religious exemption forms are valid from July 1 through June 30 each year and must be renewed annually. For compliance purposes, enforcement of annual renewal for children enrolled in summer programs (i.e., summer school, child care) will be begin on July 15.
- Notarization of the form is required for all children with religious exemptions.

State laws supporting these changes include:

- 7 AAC 57.550 – Title 7 Health and Social Services, Part 4 Children's Services and Juvenile Justice, Chapter 57 Child Care Facilities Licensing, Article 5 Care and Services, Section 550 Health
- 4 AAC 06.055 – Title 4 Education and Early Development, Chapter 6 Government of Schools, Article 1 General Administration, Section 55 Immunizations Required
- AS 18.15.355 – Title 18 Health, Safety, Housing, Human Rights, and Public Defender, Chapter 15 Disease Control and Threats to Public Health, Section 355 Prevention and Control of Conditions of Public Health Importance

The above requirements have been reviewed and approved by the State of Alaska's Department of Health and Social Services, Department of Education and Early Development, and Attorney General's Office.

School/Child Care Responsibility for Children at Risk for Vaccine-preventable Diseases

School and child care immunization requirements have nearly eliminated vaccine-preventable childhood diseases. However, outbreaks still occur and can cause mild to serious illnesses, which result in lost time from school/work for children, parents, and teachers/facility staff, as well as cause potentially high medical expenses.

Children at risk:

Children at risk for contracting vaccine-preventable diseases include those:

- too young to receive vaccines;
- with medical or religious exemptions;
- admitted to school/child care under provisional admittance clauses allowed by state law.

A list of at risk children should be maintained at all times so that in the event of an outbreak, they can be quickly identified and if necessary, excluded from their routine school/child care environment until the risk has passed ([AS 18.15.375](#)).

Vaccine-preventable disease outbreak information:

Public health staff will provide guidance to facility staff in the event of a vaccine-preventable disease outbreak in a school or child care setting. School/child care staff will need to review all children's immunization records to identify those who have not received specific vaccines or who do not have valid documentation of disease history/immunity. A susceptible child may need to be excluded from his/her routine school/child care environment until (1) the child is vaccinated, (2) the child becomes ill with the disease and completely recovers, or (3) the danger of the outbreak has passed as determined by public health officials. For example, during measles outbreaks, susceptible children may be excluded for 18 days after the onset of symptoms of the last case in the community, which may result in school/child care exclusion for several months.

Reporting the occurrence of a vaccine-preventable disease:

Health care professionals, including those in school and child care settings, are required to report certain infectious diseases to public health authorities. (A complete list of reportable diseases may be obtained from the Alaska Section of Epidemiology.) Schools and child care facilities without health care providers on site are requested to report diagnosed or suspected vaccine-preventable disease, especially those accompanied by rash and fever, by calling 907-269-8000 during business hours or 1-800-478-0084 after hours.



STATE OF ALASKA



MEDICAL EXEMPTION / IMMUNITY FORM

Alaska Immunization Regulations 7 AAC 57.550, 4 AAC 60.100 and 4 AAC 06.055 require that all children in Alaska public/private schools, and child care facilities be immunized, unless he/she is exempt.

During a vaccine-preventable disease outbreak in a school or child care facility, an exempted child may need to be excluded from routine school or child care until he/she is determined to no longer be at risk of developing the disease.

This form is required when a child has a medical contraindication or immunity and will not receive immunization(s). Complete the appropriate information below and return this form to the school, preschool, or child care facility.

Name of Child

Date of Birth

The following section must be completed by an Alaska-licensed Medical Doctor (MD), Doctor of Osteopathy (DO), Advanced Nurse Practitioner (ANP), or Physician Assistant (PA).

MEDICAL EXEMPTION

In my professional opinion, the following immunizations would be injurious to the health of the above named child or members of the child's family or household.

Check appropriate antigen(s)

☐ Diphtheria

☐ Tetanus

☐ Pertussis

☐ Measles

☐ Mumps

☐ Rubella

☐ Polio

☐ Hepatitis A

☐ Hepatitis B

☐ Varicella

☐ Hib

IMMUNITY

Check appropriate antigen(s)

☐ Diphtheria

☐ Tetanus

☐ Pertussis

☐ Measles

☐ Mumps

☐ Rubella

☐ Polio

☐ Hepatitis A

☐ Hepatitis B

☐ Varicella

☐ Hib

For Pertussis & Hib – History of disease does not infer immunity. Vaccination is recommended.

Check one: ☐ MD ☐ DO ☐ ANP ☐ PA

NAME [Please Print] of MD, DO, ANP or PA

SIGNATURE of MD, DO, ANP or PA

DATE

CLINIC NAME

PHONE NUMBER



State of Alaska Religious Exemption Form



Effective July 1, 2013

This official State form is required for all religious exemptions

Children in Alaska public and private schools, preschools and child care facilities must be immunized in accordance with state law unless he/she is exempted. For religious exemptions, parents/guardians must sign an affidavit: Alaska Administrative Codes **7 AAC 57.550 for child care** affirming that immunization conflicts with the tenets and practices of the church or religious denomination of which the parent or guardian is a member; or **4 AAC 06.055 for school** affirming that immunization conflicts with the tenets and practices of the church or religious denomination of which the applicant is a member.

(NOTE: Personal or philosophical exemptions are not allowed under Alaska regulations.)

If a religious exemption is applicable, the child's parent/guardian must complete the information below and return this form to the school, preschool, or child care facility. The form is required to be notarized and renewed annually.

Name of Child

Birth date

I/We affirm that immunization conflicts with the tenets and practices of the church or religious denomination of which the applicant/parent/guardian is a member. I/We understand that if there is an outbreak of a vaccine-preventable disease that my child has not been fully immunized against, my child may be at risk for disease and may be excluded from routine school or child care until he/she is determined to no longer be at risk of developing the disease.

Signature of Parent(s) or Guardian(s)

Telephone

Date

(Form valid from July 1 through June 30)

State of _____

Judicial District _____ SS.

The Foregoing Instrument was acknowledged before me by

_____ on this _____ day of

_____, 20_____.

Witness my hand and seal.

Notary Public (Signature)

Notary's printed name

Notary's city

My commission expires _____

SCHOOLS:
Applicable Excerpts from Alaska Immunization Regulations

REGULATIONS

Register 185, April 2008 EDUCATION AND EARLY DEV.
4 AAC 06.055(a) is amended to read:

4 AAC 06.055. Immunizations required. (a) Before entry in a state public school district or nonpublic school offering pre-elementary education through the 12th grade, or any combination of these grades, a child shall be immunized against

(1) diphtheria, tetanus, polio, pertussis, measles, mumps, hepatitis A, hepatitis B, and rubella, except rubella is not required in children 12 years of age or older; and

(2) beginning July 1, 2009, varicella.

(b) This section does not apply if the child

(1) has a valid immunization certificate consisting of

(A) a statement by a physician listing the date that each required immunization was given; or

(B) a copy of a clinic or health center record listing the date that each required immunization was given;

(2) has a statement signed by a doctor of medicine (M.D.), doctor of osteopathy (D.O.), physician assistant, or advanced nurse practitioner licensed to practice in this state, stating that immunizations would, in that individual's professional opinion, be injurious to the health of the child or members of the child's family or household; or

(3) has an affidavit signed by his parent or guardian affirming that immunization conflicts with the tenets and practices of the church or religious denomination of which the applicant is a member.

(c) A student registering in a school in a community where regular medical services are not available on at least a weekly basis and who does not have the required immunizations, may be provisionally admitted to a pre-elementary, elementary, or secondary program for a reasonable period of time for the prevailing circumstances but not exceeding 90 days after enrollment. No children will be provisionally admitted except in exceptional circumstances. Where exceptions are granted, they shall be reported to and discussed with the epidemiology section of the division of public health, Department of Health and Social Services, who will then be responsible for determining that the required immunizations are completed during the provisional period.

(d) If a parent or guardian is unable to pay the cost of immunization, or immunization is not available in the district or community, immunization shall be provided by state or federal public health services.

(e) Immunizations shall be recorded on each pupil's permanent health record form.

(f) School districts shall initiate action to exclude from school any child to whom this section applies but who has not been immunized as required by this section.

(g) A homeless child or youth, within the meaning of 42 U.S.C. 11434a(2) (McKinney - Vento Homeless Assistance Act), revised as of January 8, 2002 and adopted by reference, who does not have a record of the required immunizations, may be provisionally enrolled in a public school program for a period of time not exceeding 30 days if a parent or legal guardian has signed a witnessed statement that the child has received the required immunizations and the child's immunization records are not immediately available. A district shall report each provisional enrollment under this subsection to the epidemiology section of the division of public health, Department of Health and Social Services. The division of public health, with the assistance of the district's homeless liaison, will be responsible for locating the required immunization records. If the immunization records are not located during the provisional period, or the records indicate that the child has not received the required immunizations, the child must be immunized as described in (a) and (b) of this section to continue being enrolled in the public school program. The division of public health, with the assistance of the district's homeless liaison, will be responsible for ensuring that the child receives the required immunizations.

History: Eff. 1/13/73, Register 44; am 8/28/77, Register 63; am 12/30/2000, Register 156; am 3/22/2008, Register 185

Authority: [AS 14.07.020](#)

[AS 14.30.125](#)

CHILD CARE FACILITIES:
Applicable Excerpts from Alaska Immunization Regulations

REGULATIONS

7 AAC 57.545. Reducing the spread of disease. To reduce the spread of disease, a child care facility shall meet the applicable requirements of 7 AAC 10.1045 (Universal Precautions) and 7 AAC 10.1050 (Caregiver Hygiene). (Eff. 6/23/2006, Register 178)

7 AAC 57.550. Health. (a) At or before admission of a child, a child care facility shall obtain from the child's parent

- (1) a valid immunization certificate; or
- (2) evidence that the child is exempt from immunization.

(b) A valid immunization certificate is a copy of the child's original immunization record showing that, in a manner consistent with the timetable prescribed by the department's childhood immunization schedule, the child has received, or has begun and is continuing to receive, immunizations.

(c) The immunization record includes a statement or record by a physician, clinic, or health center indicating the date each required immunization was given.

(d) Evidence of exemption from immunization must include

(1) a statement signed by a doctor of medicine (M.D.), a doctor of osteopathy (D.O.), a physician assistant, or an advanced nurse practitioner, licensed in this state, stating that immunizations would, in that individual's professional opinion, be injurious to the health of the child or members of the child's family or household;

(2) an affidavit signed by the child's parent or guardian, affirming that immunization conflicts with the tenets and practices of the church or religious denomination of which the parent or guardian is a member; or

(3) an entry, for a one-day exemption, that the child is attending the child care facility for the first time.

(e) A child care facility in a community where medical services are not available on at least a weekly basis may provisionally admit a child who does not have the immunization certificate or evidence of exemption required under (a) of this section until the certificate or evidence can be obtained, but for no longer than 60 days.

(f) A satisfactory immunization audit report from the department during the previous 12 months will be accepted as evidence that the child care facility satisfied the requirements of (a) - (e) of this section.

(g) A child care facility may admit a mildly ill child or allow the child to remain in attendance if the child's needs do not compromise the care of other children.

(h) A child care facility that cares for a mildly ill child shall arrange a plan of care with the parent and provide a place where, under supervision, the child may rest or play quietly, apart from other children, if warranted.

(i) A child care facility may not admit a child who shows definite signs of a serious illness or of a highly communicable disease or allow the child to remain in attendance unless a medical provider approves the child's attendance.

(j) A child care facility shall provide an opportunity for supervised rest or sleep periods for each child under the age of five who is in care more than five hours, and for any other child, if desired by the child. For a child who is unable to sleep, the facility shall provide time and

space for quiet play. The facility may place in a crib only an infant, a non-climbing toddler, or a child identified as having special needs under 7 AAC 57.940, if appropriate. (Eff. 6/23/2006, Register 178)

Authority: AS 44.29.020 AS 47.32.010 AS 47.32.030

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Editor's note: The childhood immunization schedule referred to in 7 AAC 57.550 may be obtained from the Department of Health and Social Services, Division of Public Health, Section of Epidemiology, P.O. Box 240249, Anchorage, AK 99524-0249, (telephone: 907-269-8000).